MEDICO-LEGAL AND MEDICO-ETHICAL.

ADVERTISING IN THE DAILY PAPERS.

PERTHSHIRE.—So flagrant a disregard of the honourable traditions of the medical profession and the well-known rules which govern—or, at least, should govern—the modern practitioner in relation to advertising in lay papers, as that exhibited by Dr. D., in his repeated advertisement in the newspaper forwarded, deserves condemnation, and, in our opinion, a resolute enforcement of the disciplinary laws of the university of which the offending member is a graduate. For this purpose, we would suggest that our correspondent should address a simple protesting note to the authorities thereof, signed by himself and some two or three other practitioners, with the view to emphasise it, and transmit therewith copies of the lay paper in question.

A SUPPLANTER.

A MEMBER writes: A. is a senior practitioner, and calls B. in consultation to see a patient. A. has been attending the patient for a month. The consultation being over, no intimation is given A. that his services are no longer required; hence he goes to see his patient next day. On going in at one door he sees B. going out through the other, of course to his surprise and astonishment. On going inside the house he finds B. has taken up the case. Under these circumstances A. explains to the patient's friends he can no longer attend and gives up the case.

***** If the above statement has fair and the statement has fair an

** If the above statement be a fair representation of the facts of the case. the course pursued by B. was not only in direct contravention of the clearlydefined rules of professional etiquette, but in contravention also of the moral law of doing unto others as he would wish to be done by, and therefore justly subjects him to professional censure.

With reference to A.'s position in the matter, we assume that before resigning charge of the case he solicited an explanation from the family of the patient, and, finding it unsatisfactory, retired therefrom, in doing which he would, under the circumstances, be fully justified, and also in seeking from

B. an explanation of his apparently unprofessional conduct.

FEES FOR ATTENDANCE AT POLICE STATIONS.
G. A. J.—A medical practitioner called upon by the police to visit a sick person in any station house within the metropolitan district may claim from the police authorities a fee of 33. 6d. for every such visit paid in the daytime, and the sum of 7s. 6d. for every such visit between the hours of 11 P.M. and 6 A.M. A certificate of attendance should be obtained from the inspector on duty. The same fees are, it seems, very generally allowed throughout England for similar services, but we are not aware of any order of the Treasury on the subject outside the metropolitan district, and cannot say that they would be recovered as of right.

recovered as of right.

If our correspondent was called upon by the constable qud relieving officer, we think he would be held to have attended in his capacity of Poor-law medical officer, and thereupon the attendance would be within the scope of his

duties as such.

THE SCOTTISH TRIPLE QUALIFICATION AND DISPENSING.
TRES.—We are advised that the Scottish triple qualification would entitle the holder to retail drugs and chemicals, if he is not restrained from so doing by the regulations of the licensing body. The Pharmacy Acts, in restricting the right to keep an open shop for the sale of drugs by retail to certain specified persons, save the rights of the "legally qualified apothecary," within which definition our correspondent, if duly registered, would, we think, be held to come as the holder of the qualification referred to, such qualification necessarily embracing pharmacy.

SALE OF POISONS BY UNQUALIFIED ASSISTANTS OF MEDICAL

ASSISTANT WRITES: In view of the decisions quoted in the BRITISH MEDICAL JOURNAL of November 8th, may I ask what will now be the position of those assistants who have passed the assistant's examination of the Apothecaries' Society of London, and who are qualified to compound and dispense medicines, but who have neither medical nor pharmaceutical qualifications?

** The decision referred to in the BRITISH MEDICAL JOURNAL of November 8th was apparently in a case where the defendant had no qualification whatever; but, apart from this, we think that, although an assistant by examination at the Society of Apothecaries is qualified in materia medica, yet he is strictly speaking only entitled to sell poisons by retail under the personal supervision of a qualified employer (Pharmaceutical Society v. Wheeldon, 24 Q. B. D., 689).

CORONERS' FEES IN HOSPITAL CASES

W. W. writes as follows: I am an honorary surgeon to a public hospital which is worked in the same way as a cottage hospital, that is, each practitioner attends his own patients. Can I claim a fee for attendance at an inquest held in the hospital upon a patient of mine that died in the hospital? The coroner is not unwilling to pay me, but thinks be has not the power.

** By the Coroners Act, 1887, Section 22, Clause 2, it is stated as follows: "When an inquest is held on the body of a person who has died in a county or other lunatic asylum, or in a public hospital, infirmary, or other medical institution, or in a building or place belonging thereto, or used for the reception of the patients thereof, whether the same be supported by endowments or by voluntary subscriptions, the medical officer whose duty it may have been to attend the deceased person as a medical officer of such institution aforesaid, shall not be entitled to any fee or remuneration.

Under these circumstances, it appears that our correspondent, as one of the

medical officers of the hospital, whose duty it may have been to attend the deceased person, would not be entitled to receive a fee for attending and giving evidence at the coroner's court. In a case which we fully reported about four years ago, the county court judge at Croydon upheld the opinion we now express.

FOREIGN DEGREES.

JONES.—Inasmuch as the degree in question is, under the circumstances of the date of its obtainment, inadmissible for registration in the Medical Register, we need scarcely note that its possessor has no legal claim in this country to the title assumed. It is possible, however, in the event of no opposition from the medical staff, that the Committee of the dispensary alluded to may, as an act of courtesy, be induced to assent to the degree being specified in the annual report, etc.

MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.—Monday, December 8th.

Protection of Infant Life.—The LORD CHANCELLOR presented a Bill for the better protection of infant life, which was read a first time.

HOUSE OF COMMONS .- Thursday, December 4th.

Education of the Blind.—Sir W. HART-DYKE, in answer to Mr. MUNDELLA, said it was the intention of the Government to introduce a measure dealing with the education of the blind in England later in the session, so soon as the progress of public business would justify their doing so.

 $\label{eq:main_problem} Friday, December 5th.$ Mr. Wardle brought in a Bill to amend the law in regard to the education of blind and deaf-mute children in England and Wales, which was read a first

time. The Dog Muzzling Order.—In reply to Mr. DIXON-HARTLAND, Mr. CHAPLIN said that he had found it extremely difficult to relax the muzzling order in the County of Middlesex until the same course was adopted for the whole of the Metropolitan Police District. There had been a case of rabies so lately as the month of September within that area, and he was advised that a sufficient time had not elapsed to justify him in withdrawing it at present. He could not indicate the date of its probable withdrawal, but the returns had been exceedingly favourable of late, and he had great hopes that he might be able to relax the order, so far as the metropolis was concerned, at no distant date. In reply to a further question, Mr. Chaplin said that that was not quite accurate. The muzzling order prevailed throughout the whole Metropolitan Police district, and within that district was included parts of several other counties in addition to the county of Middlesex. tion to the county of Middlesex.

Monday, December 8th.

Rank of Army Medical Officers .- Dr. FARQUHARSON asked the Secretary of State for War if he was able to inform the House what answer he has given or intended to give to the British Medical Association, the various medical corporations, and the medical schools, who recently memorialised him by deputation and otherwise, with regard to the proposed changes in the Army Medical Department. -Mr. STANHOPE replied that the hon, gentleman would no doubt agree with him that the answer should be given to the deputation which he received some months ago. Various circumstances had prevented him giving an earlier reply, and he would see that it would be given not later than January.

OBITUARY.

A. F. McGILL, F.R.C.S.

ARTHUR FERGUSSON McGILL, whose untimely death at the early age of 44 years all in any way connected with the Leeds School will never cease to deplore, was the youngest son of the late William McGill, M.D., and was born in the village of Cartmel, in Lancashire. He received his general education at Tonbridge School. Having matriculated at London University, he entered the medical department of King's College in October, 1864, and obtaining a Warneford Entrance Scholarship. He sometimes regretted that he had never completed his graduation in medicine. seeing that he had passed the preliminary scientific and intermediate examinations for the M.B. degree.

Having held all the posts open to students at King's Collegeincluding that of house-surgeon to his godfather, the late Sir William Fergusson—he was appointed resident medical officer to the General Infirmary at Leeds, which post he continued to hold till 1869, when he determined to commence the practice of his profession in Leeds. On resigning his office at the infirmary the board of management took the unusual course of presenting him with a gratuity of £50 in recognition of the meritorious manner in which his work had been done.

In 1874, having been admitted a Fellow of the Royal College of Surgeons, he was appointed a Demonstrator of Anatomy in the Leeds School of Medicine. Afterwards he filled successively the

chairs of Pathology, Anatomy, and Surgery, which last he held at the time of his death. Soon after joining the School of Medicine he was elected one of the surgeons to the Leeds Public Dispensary, which office he continued to hold until his appointment to the assistant-surgeoney to the infirmary in 1882.

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In 1884, on the retirement of Mr. Wheelhouse and Mr. Teale, he was promoted to be surgeon to the hospital. During the seventeen years in which he was an active member of the school staff he endeared himself to students and colleagues alike by his unfailing kindness and gentleness towards all, and made for himself a reputation and popularity as a teacher such as few have achieved.

His practical work in surgery, begun at the Leeds Dispensary in 1874, soon secured for him a foremost place amongst the surgeons of the West Riding. At the dispensary, the amount of work he did may be truly described as enormous, and he himself in later years often spoke of it as the best work he ever did; and when it is borne in mind that it consisted in such operations as, for example, amputation of the superior extremity, ligature of the first part of the left subclavian artery, hysterectomy, and others of the greatest gravity performed in the cottages of the poorest classes of a large manufacturing community, it will readily be seen what enthusiasm and what skill he brought to bear upon his work. There is no doubt that at the public dispensary he laid the foundations of, if he did not actually make, his great reputation as a practical surgeon. His appointment to the Leeds Infirmary afforded a much wider and more convenient field for the display of his great powers as a teacher and operator. Of his work in detail it is unnecessary to speak at length. Perhaps the part of it with which his name will be most constantly associated in the minds of the general body of the profession is the operative treatment of prostate enlargement, in which he achieved such remarkable success, and which it may be justly said, he was the first to establish upon a permanent basis in this country. In this connection it is pleasant to recall how his characteristic modesty led him to discover that he had been anticipated in his operation of suprapubic prostatectomy by Dr. Bellfield, of Chicago, and how his graceful acknowledgment of that surgeon's work was recognised by a leading article in one of the foremost American journals. To indicate the general esteem in which he was held by all connected with the infirmary, it will suffice to reproduce the following resolution adopted by the Weekly Board on November 28th, 1890.

"During the twelve years of Mr. McGill's tenure of office at the Leeds Infirmary—nearly four years as resident medical and surgical officer, two years as assistant-surgeon, and nearly seven years as full surgeon—he has done much to maintain, and not a little even to increase, the surgical fame of this hospital, and has won an honourable name amongst the leaders of English surgery. A regular attender at the Board meetings, he was always wise in counsel, and zealous for continued improvements both in the buildings and in the administration. Always cheerful and pleasant, he was a most kindly and loyal colleague, and has been pleasant, he was a most kindly and loyal college, and regarded not only with respect, but with sincere affection, by every member of the Board, the faculty, and the household. loss of such a surgeon and such a colleague in the midst of his useful career, and in the fulness of his brilliant powers, is a source of personal grief to every member of the Board; and they beg very sincerely to tender their sympathy to his brother and sister, trusting that the hearty appreciation felt for their late brother in the institution he has served so well, may be some little consola-tion to them in their time of sorrow." The Chairman of the Board (Mr. R. B. Jowitt), in proposing the resolution, stated that during the twelve years Mr McGill had been connected with the Leeds Infirmary, he had devoted himself seriously at all times to its interests, and had lent additional lustre to the acknowledged eminence of the medical staff of that institution; while latterly, although still comparatively young, Mr. McGill had, from his surgical skill, attained a high rank in the profession generally. Mr. Jowitt also referred to the help he had given as a member of the Building Committee in connection with the extension of the infirmary now being carried out, and cited Mr. McGill as a marvellous instance of patient persistence in his work during the long struggle with the malady which he himself knew too well must shortly prove fatal.

In 1886 he first began to show signs of failing health in the shape of a carbunculous inflammation at the nape of the neck, for which he was treated by his colleague and friend, Mr. Teale. This was soon followed by intense neuralgic pains in the shoul-

ders, which he himself thought to indicate thoracic aneurysm or malignant disease of the spine, but which were soon found to be due to diabetes mellitus, a disease which had carried off his mother and a younger brother. For some time his malady was quite amenable to treatment; in fact, so much so that those near him were led to hope that he might live it down; but in the course of time it became less and less so, until during the last year it had been quite intractable, and it was with anxious sorrow that his friends and colleagues saw him gradually becoming more feeble and more wasted, until at last the end came while he was still, in spite of great physical suffering, at work. Three days before his death, when so feeble he could with difficulty walk, he went cheerfully to see a patient some forty miles away. The following day he was compelled to keep his bed on account of intense abdominal pain, which was soon succeeded by the final dyspnœa and coma of his disease.

Of Mr. McGill's personal characteristics the writer of this notice almost fears to speak, knowing how much he must fall short in that which he, above all others perhaps, owes to the memory of him whom we have lost. If such a word of such a man may be written down, Mr. McGill was before all things a gentleman-a gentleman who happened to be a great and distinguished surgeon, for his professional reputation and success were to him a secondary consideration; indeed, no consideration at all if they could not be pursued without the smallest staining of his more purely human relations with those around him. For him the little tricks and artifices of manner and even of dress which seem to make so much for the success of some of us were impossible and unknown, while, when displayed in others, they only excited his kindly smile. His generosity to all, and especially to those who happened to be his juniors, was unbounded, nay, even quixotic in its abundance. The thought of lifting himself into notoriety, or of claiming for himself even that recognition which was most obviously his due, never occurred to him, and on more than one occasion have we heard him carefully and solemnly divest himself of credit which had been made by others to seem to belong to him. In short, he was of the very salt of the profession which he adorned, and of the community in which he moved.

JOHN ARMSTRONG, M.D., M.R.C.S.E., L.S.A.

On November 20th last, an old and highly respected member of the South-Eastern Branch of the British Medical Association, Dr. John Armstrong, passed to his rest. He died at Green-street Green, near Dartford, where he had retired seventeen years ago. after practising in Gravesend for upwards of forty years. When he first went to Gravesend, he acted as assistant to the late Dr. Adam Park (brother of the celebrated Mungo Park, the African traveller), with whom he was afterwards a partner for two years. He was educated at St Bartholomew's Hospital, London, and at the Royal College of Surgeons of Ireland. He became M.R.C.S.E. and L.S.A. in 1828, and received the degree of M.D. from Marischal College, Aberdeen, in 1851. He was also a Fellow of the Obstetrical and Medical Societies of London, and was surgeon, and afterwards consulting surgeon, to the Gravesend Infirmary and Dispensary, of which institution he was one of the founders, and, for some years previous to his death, was one of its vice-presidents. He was also a justice of the peace for the borough, and always took a great interest in all religious and social movements for the benefit of the people. He was held in great respect by his fellow-townsmen, and highly esteemed by his professional brethren in the neighbourhood, who elected him twenty-two years ago President of the South-Eastern Branch, and deputed him as their representative on the General Council. He was to the last a very regular attendant and frequent speaker at the District meetings, where his genial presence and sage and practical observations will be much missed. A friend who knew him well writes: "He was remarkably methodical in his habits, and always enjoyed excellent health, being able within the last few years to visit Ireland, Scotland, and Cornwall. His enjoyment of these tours was great, as the writer can testify, when travelling in the Highlands together, although he was then 83 years of age." He died in his 86th year from an attack of pneumonia, after an illness of five days, painless and peaceful.

His remains were interred in the family vault in the Gravesend Cemetery, and the great respect in which he was held was testified by the Mayor, magistrates, and many medical men joining the funeral cortége, which, by his own pre-expressed desire, had no black carriages; while many wreaths were sent by sorrowing friends, some of whom had known him for half a century.